03-20-06

PART B - FEE(S) TRANSMITTAL

complete and send his form, together with applicable fee(s), to: Mail

MAR 1 6 2006

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1/2006 HDEMESS2 00000017 181945 10033195				Andrea		(Depositor's name)
C:1501 1400.00 C:1504 300.00 C:8001 30.00	DA			$\frac{4}{3}$	Ma Ber	(Signature) (Date)
APPLICATION NO. FILING DATE FIRST NAMED II			NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/033,195	12/28/2001 Stephen P.A. F			or	2719.2002-001	7969
TITLE OF INVENTION: N	UCLEOTIDES AND ANAI	OGS HAVING PHOTO	DREMOVABLE	PROTECTING GROU	JPS	
APPLN. TYPE	PPLN. TYPE SMALL ENTITY ISSUE FEE		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	03/27/2006
EXAMINER		ART UNIT	CI	ASS-SUBCLASS		
RILEY, JEZIA		1637	637 427-211000		,	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 Thomas E. Malone, Esq 2 Lisa M. Treannie, Esq 3 Jesse A. Fecker, Ph.D			
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN.	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee data woof this form is NOT a sub	vill appear on the bestitute for filing		ce is identified below, the d	locument has been filed for
Affymetrix, Inc. Santa Clara, California Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governments						
4a. The following fee(s) are			ment of Fee(s):			
Issue Fee				nount of the fee(s) is en	closed.	
Publication Fee (No s	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to					
Advance Order - # of	Copies 10	L21 Ti Depo	he Director is I sit Account Nu	ereby authorized by cl	harge the required fee(s), or enclose an extra c	credit any overpayment, to copy of this form).
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Authorized Signature	Owam.	reannie	(41,36	Date	3/16/0	6
Typed or printed name _	Lisa M. Trea	nnie, Esq.		Registration	No. 41,368	
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